

Release of Information

The overall mission of this office is to help the agriculture community diversify their agricultural operations and increase net farm income.

The principle means of accomplishing this task is the implementation of Board policy relating to the Agricultural Development Fund via the application process pursuant to KRS Chapter 248. As a result, the applications that do not satisfy policy requirements are denied. Similarly, some applications are not in a shape where the Board can make an informed decision as to whether said application is viable and/or satisfies Board policy. In those circumstances, our staff will try to work with the applicant to get the application in a form that can be submitted for a decision by the Board.

In other circumstances, it may be beneficial for staff to consult and share information with other relevant entities to provide further assistance to the applicant. These entities include but are not limited to the Kentucky Department of Agriculture, the Kentucky Center for Cooperative Development or the Kentucky Horticulture Council. The "sharing" of information would include the release of any general information contained in your application. General information means information that is not deemed "proprietary" or "confidential."

Thus, by signing below, you as the applicant hereby authorize the release of any and all general information that is included or made a part of your application by the Governor's Office of Agricultural Policy to any relevant entity for the purposes of assistance with the Kentucky Agricultural Board's application process.

(Individual)

I, _____, have read the paragraph regarding the "release of information" and understand the information contained therein. I hereby consent to allow the Governor's Office of Agricultural Policy to release said information described above to the entities described above and for the purpose(s) described above.

| | |
|---------------|-------|
| Signature: | Date: |
| Name Printed: | |

Or

(Organization)

I, _____, as the authorized representative of _____ have read the paragraph regarding the "release of information" and understand the information contained therein. I hereby consent to allow the Governor's Office of Agricultural Policy to release said information described above to the entities described above and for the purpose(s) described above.

| | |
|----------------------|---------------|
| Signature: | Date: |
| Name Printed, Title: | Organization: |